

# WP 15-MD3101

Revision 5

## Verification of Readiness to Startup or Restart WIPP

Management Control Procedure

EFFECTIVE DATE: 02/09/11

W. H. Bryan  
APPROVED FOR USE

**TABLE OF CONTENTS**

CHANGE HISTORY SUMMARY ..... 3

INTRODUCTION..... 4

REFERENCES ..... 5

PRECAUTIONS AND LIMITATIONS ..... 6

PREREQUISITE ACTIONS..... 6

PERFORMANCE ..... 6

1.0 READINESS REVIEW DETERMINATION ..... 6

2.0 DETERMINATION OF THE STARTUP AUTHORIZATION AUTHORITY ..... 7

3.0 STARTUP NOTIFICATION REPORT..... 8

4.0 OPERATIONAL READINESS REVIEW REQUIREMENTS ..... 9

5.0 READINESS ASSESSMENT REQUIREMENTS..... 13

Attachment 1 – Acronyms ..... 18

Attachment 2 – Items to Consider When Determining that a Readiness Review is Not ...  
Required..... 19

Attachment 3 – Determining if a Change is Substantial ..... 20

Attachment 4 – Startup Notification Report Format and Content ..... 21

Attachment 5 – Core Requirements to Address in a Readiness Review Plan of Action 22

Attachment 6 – Guidance for the Format and Content of an ORR Implementation  
Plan ..... 26

Attachment 7 – Readiness Assessment Plan of Action Sample Forma ..... 31

**CHANGE HISTORY SUMMARY**

REVISION NUMBER	DATE ISSUED	DESCRIPTION OF CHANGES
5	02/09/11	<p>Name change this revision.</p> <p>This revision is to resolve deficiencies identified in SRIDs reviews and to have the WIPP procedure implement the requirements of new DOE O 425.1D.</p> <p>Changes throughout the document to numerous to note.</p>

## INTRODUCTION

This procedure provides the process for performing a Readiness Review (RR) at the Waste Isolation Pilot Plant (WIPP). This procedure provides direction for (1) evaluating the need to perform an Operational Readiness Review (ORR) or Readiness Assessment (RA) prior to the startup or restart of nuclear facilities, activities, or operations, and (2) the requirements for conducting an ORR or RA. This procedure implements the contractor requirements specified in U.S. Department of Energy (DOE) Order 425.1D, *Verification of Readiness to Start-up or Re-start Nuclear Facilities*. This procedure also incorporates the methodology for conducting RRs and RAs as described in DOE-STD-3006-2010, *Planning and Conducting Operational Readiness Reviews*.

The difference between an ORR and RA involves the scope of the review. The scope of the review is defined by the physical or geographic limits of the review, encompassing the systems, facilities, and operations being started, and the core requirements that include the safety management programs applicable to the systems, facilities and operations being started. The scope of an RA may focus on only selected elements. The ORR or RA verifies whether the system, facility, and operations can be conducted within the safety basis, identifies corrective actions to resolve any deficiencies noted during the review, and provides approval to start or restart nuclear operations if there are no significant issues identified.

WIPP is classified as a Hazard Category 2, Nonreactor Nuclear Facility. Facility categorization was performed in accordance with DOE-STD-1027-92, *DOE Standard Hazard Categorization and Accident Analysis Techniques for Compliance with DOE Order 5480.23, Nuclear Safety Analysis Reports*, and the analysis is presented in DOE/WIPP-07-3372, Waste Isolation Pilot Plant Documented Safety Analysis (DSA).

The nuclear facilities at WIPP consist of those areas which house transuranic (TRU) waste and the equipment which moves and emplaces TRU waste containers in the underground waste disposal repository. Nuclear activities and operations at WIPP consist of those activities which direct and support personnel in performing waste processing and emplacement.

Performance of this procedure generates the following record(s), as applicable.

- Startup Notification Report (SNR)
- Readiness to Proceed Memoranda
- ORR/RA Plan of Action
- ORR/RA Implementation Plan
- Forms for documenting ORR/RA assessments, findings, and corrective action plans
- RA Checklist

- ORR/RA Final Report
- Closure Package/Corrective Action Plan (includes Pre-Start and Post-Start Findings)

Site Operations and Disposal Manager (or designee) shall prepare an inventory of readiness verification documentation for the ORR or RA in accordance with WP 15-RM3002, Records Filing, Inventorying, Scheduling, and Dispositioning.

Records shall be dispositioned in accordance with WP 15-RM3005, Records Transfer and Retrieval.

## REFERENCES

### BASELINE DOCUMENTS

- DOE O 422.1, *Conduct of Operations*
- WP 15-PA.01, Operating Experience/Lessons Learned Program

### REFERENCED DOCUMENTS

- Title 10 Code of Federal Regulations (CFR) 830, "Nuclear Safety Management"
- 10 CFR 851, "Worker Safety and Health Program"
- DOE Order 425.1D, Verification of Readiness to Start Up or Restart Nuclear Facilities
- DOE-STD-1027-92, *DOE Standard Hazard Categorization and Accident Analysis Techniques for Compliance with DOE Order 5480.23, Nuclear Safety Analysis Reports*
- DOE-STD-3006-2010, *Planning and Conducting Operational Readiness Reviews*
- DOE-HDBK-3012-2003, *Guide to Good Practices for Operational Readiness Reviews (ORR) – Team Leaders Guide*
- DOE/WIPP-07-3372, Waste Isolation Pilot Plant Documented Safety Analysis
- WP 15-OR.01, Line Management Assessment Plan
- WP 15-RM3002, Records Filing, Inventorying, Scheduling, and Dispositioning

- WP 15-RM3005, Records Transfer and Retrieval

## **PRECAUTIONS AND LIMITATIONS**

NONE

## **PREREQUISITE ACTIONS**

NONE

## **PERFORMANCE**

### **1.0 READINESS REVIEW DETERMINATION**

- 1.1 Site Operations and Disposal Manager, ensure that a properly scoped RR is planned and conducted to verify readiness for the startup and restart of WIPP nuclear facilities, activities or operations unless the following conditions are met:

- The restart is a resumption of routine nuclear operations after a short interruption (such as maintenance activities governed by existing maintenance procedures and processes). “Short” is defined as up to 12 months for WIPP nuclear facilities, activities or operations, and
- The restart is conducted using WTS approved operating procedures which provide specific direction for operating systems and equipment during normal conditions.
- The criteria in Attachment 2 have been considered.

- 1.2 Site Operations and Disposal Manager, evaluate the following and determine whether an ORR is necessary:

An ORR shall be conducted for any of the following situations at WIPP:

- The initial startup of a newly constructed nuclear facility (with a new DSA and associated Technical Safety Requirements [TSRs]).
- Initial startup after conversion of an existing facility to a new nuclear mission with a new DSA and associated TSRs.
- The restart of a nuclear facility, activity or operation that has upgraded its hazard categorization.
- Restart after a DOE management official directs the shutdown of a nuclear facility, activity or operation for safety reasons.

- Restart of a nuclear facility, activity, or operation after violation of a Safety Limit as defined in 10 CFR 830.3. WIPP currently has no Safety Limits.
- Any situation determined appropriate by DOE or contractor line management.

An RA shall be conducted for any of the following situations at WIPP:

- Initial startup of a new WIPP nuclear activity or operation with a new DSA and associated TSRs.
- Restart after an extended shutdown of a WIPP nuclear facility, activity, or operation (an extended shutdown is one that exceeds 12 months for WIPP).
- Startup or restart of a WIPP nuclear facility, activity or operation after substantial process, system, or facility modification. Attachment 3 contains a list of items to be considered for determining whether a substantial process, system, or facility modification has occurred.
- As directed by DOE.

## 2.0 DETERMINATION OF THE STARTUP AUTHORIZATION AUTHORITY

2.1 Site Operations and Disposal Manager, ensure that for nuclear facility, activity, or operation startup or restart actions, the Startup Authorization Authority (SAA) is determined using the following criteria:

- For initial startup of a newly constructed Hazard Category 1 or 2 nuclear facility (not activity or operation) with a new DSA and associated TSRs, the Secretary of Energy (or designee) shall approve startup. For initial startup of a newly constructed Hazard Category 3 nuclear facility [not activity or operation] with a new DSA and associated TSRs, the Cognizant Secretarial Officer (CSO) (or designee) must approve startup.
- For initial startup of a newly developed nuclear activity or operation at WIPP with a new DSA and associated TSRs, approval to start shall be granted by an official of a level commensurate with the DSA Approval Authority.
- For initial startup after conversion of an existing nuclear facility to a new Hazard Category 1 or 2 nuclear facility with a new DSA and associated TSRs, the Secretary of Energy (or designee) shall approve startup.

- For a restart of a nuclear facility activity or operation that has upgraded its hazard categorization to Hazard Category 1 or 2, the Secretary of Energy or designee shall approve startup. For a restart of a nuclear facility, activity, and operation that has upgraded is hazard categorization to Hazard Category 3, the Cognizant Secretarial officer or designee shall approve the startup.
- For a shutdown directed by a DOE management official for safety reasons, approval to restart shall be granted by an official of a level commensurate with the official ordering the shutdown.
- For a shutdown following a violation of a Safety Limit, approval to restart shall be granted by an official of a level commensurate with the Approval Authority for the Safety Limit.
- For an extended shutdown of a WIPP nuclear facility, activity, or operation, the DOE Cognizant Secretarial Officer (or designee) shall approve restart.
- For a shutdown because of substantial process, system, or facility modification to a WIPP nuclear facility, activity, or operation, the DOE Cognizant Secretarial Officer (or designee) shall approve restart.
- For startup or restart of a nuclear facility, activity, or operation for which Readiness Reviews were required because a DOE official deemed it appropriate, the official approving startup or restart shall be of a level commensurate with the official directing the review to be conducted.
- The SAA will be as specified in the approved Startup Notification Report (SNR). The SAA may be a senior contractor official if so designated in the Startup Notification Report (SNR).

### 3.0 STARTUP NOTIFICATION REPORT

#### 3.1 Site Operations and Disposal Manager, perform the following:

- 3.1.1 Generate a SNR, in accordance with the guidance provided in Attachment 4 of this procedure, for submittal to CBFO at the end of each calendar quarter (Typically 3/31, 6/30, 9/30, 12/31, unless a different periodicity has been agreed to by the M&O contractor and CBFO).
- 3.1.2 Ensure that the SNR projects ahead at least one year, updating information from previously approved SNRs for startups and restarts that have not yet occurred, and adding information for

each startup or restart that has been identified since the last approved SNR.

- 3.1.3 Submit the SNR via the WTS General Managers Office to CBFO for approval at the end of each calendar quarter, or as agreed upon between CBFO and WTS.
- 3.1.4 Ensure that Contractor Readiness Reviews do not commence until the SNR and Plan of Action (POA) have been approved by the SAA.
- 3.1.5 Ensure that every startup or restart determined to require a Readiness Review is included in the SNR.
- 3.1.6 Ensure that readiness for startups and restarts are verified using an ORR or properly scoped RA, as appropriate.
- 3.1.7 Ensure that routine or normal operating procedures are not developed for the purpose of avoiding a properly scoped RA.

#### 4.0 OPERATIONAL READINESS REVIEW REQUIREMENTS

- 4.1 Site Operations and Disposal Manager (or designee), develop a POA, which describes the scope of a planned ORR, as follows:
  - The POA shall provide a clear discussion of the physical or geographic scope of the ORR and a clear description of the structures, systems, and components, individual processes, and programs that are within the scope of the ORR.
  - The POA shall also identify the proposed ORR team leader.
  - The POA shall define the depth or tailoring for each core requirement to more fully describe the total required scope of the ORR. Attachment 5 contains a listing of core requirements and guidance for evaluating core requirements.
  - All core requirements, identified in Attachment 5, shall be addressed when developing the breadth of the ORR.
  - If a particular core requirement will not be evaluated in an ORR, justification shall be provided in the POA including referencing a timely, independent review that addressed the core requirement showing that it was successfully implemented.
  - The POA shall include the prerequisites for starting the ORR. The prerequisites shall define measurable actions or deliverables that,

when completed, provide assurance that readiness has been achieved for each core requirement.

- 4.2 Site Operations and Disposal Manager, forward the POA to CBFO via a transmittal from the GM for approval by the SAA.
- 4.3 WTS General Manager or Site Operations and Disposal Manager, assign the ORR team leader.
- 4.4 ORR team leader, perform the following:
  - 4.4.1 Select the ORR team members.
  - 4.4.2 Verify that ORR team members meet each of the following qualification and training requirements:
    - Technical knowledge of the area assigned for evaluation, including experience working in the technical area.
    - Knowledge of performance based assessment processes and methods.
    - Knowledge of facility, activity, or operation-specific information.
    - An ORR team member shall not review work for which he or she is directly responsible.
- 4.5 The ORR team leader and any senior advisors shall not be individuals from organizations that are assigned direct line management responsibility for the work being reviewed. Any exceptions require SAA approval.
- 4.6 ORR team leader, determine and document the qualifications of ORR team members and their freedom from a conflict of interest in the areas they are assigned to review.
- 4.7 WTS management, support the ORR team leader in staffing the ORR team.

---

**NOTE**

DOE-HDBK-3012, *Guide to Good Practices for Operational Readiness Reviews, Team Leader's Guide*, and DOE STD 3006-2010 provide information useful to team leaders in preparing for and conducting Readiness Reviews.

---

- 4.8 ORR team, develop an ORR Implementation Plan (IP). The ORR IP documents the evaluation criteria and the review approaches based on the scope defined in the ORR POA. Attachment 6 provides guidance for the format and content of an ORR Implementation Plan.

- 4.9 ORR team leader, approve the ORR IP.
- 4.10 Site Operations and Disposal Manager, forward the ORR IP to CBFO for information via a transmittal from the WTS General Manager.
- 4.11 Prior to starting the ORR, WTS General Manager (or designee), perform the following:
  - 4.11.1 Provide to the SAA a formal written Readiness to Proceed Memorandum certifying that the facility, activity or operation is ready for startup or restart.
  - 4.11.2 Ensure that the preparations for startup or restart have been completed with the exception of a manageable list of open prestart issues.
  - 4.11.3 Ensure that the prestart issues shall have a well-defined schedule for closure to allow the ORR team to review the closure process.
  - 4.11.4 Ensure that the ORR POA was approved by the SAA and that prerequisites are met.
  - 4.11.5 Ensure that specific events significant to the startup and restart process that occur prior to the formal commencement of the ORR; e.g., site emergency response drills, are reviewed by the ORR team at the time they are conducted.
  - 4.11.6 Ensure that a formal approval for the Readiness to Proceed Memorandum from the SAA has been received, if necessary.
  - 4.11.7 Notify the ORR team leader that the ORR can start.
- 4.12 ORR team, conduct the ORR in accordance with the IP. Attachment 6 of this procedure includes example forms for documenting reviews, identifying findings, and associated corrective action plans.
- 4.13 Upon completion of the ORR, ORR team leader, with support from the team members, prepare, approve, and submit a final report that contains the following:
  - 4.13.1 The results of the ORR with a conclusion whether startup or restart of the nuclear facility, activity, or operation can proceed safely.

- 4.13.2 The ORR final report shall state whether facility management has established the following:
- An agreed upon set of requirements to govern safe operations of the facility, activity, or operation.
  - That this set of requirements has been formalized with CBFO through the contract or other enforceable mechanism.
  - That these requirements have been appropriately implemented in the facility, activity or operation, or appropriate compensatory measures, formally approved by CBFO, are in place during the period prior to full implementation.
  - That adequate protection of the public health and safety, worker safety, and the environment has been maintained.
- 4.13.3 The final report shall be of adequate detail to support its conclusion, such that a knowledgeable reader would reasonably be expected to draw the same conclusions.
- 4.13.4 The final report shall include a statement regarding the team leader's assessment of the adequacy of the implementation of the core functions and guiding principles of Integrated Safety Management (ISM) at the facility undergoing the review.
- 4.13.5 There shall be a lessons learned section of the final report that relates to design, construction, operation, and decommissioning of similar facilities, activities or operations and to help guide future Readiness Review efforts
- 4.14 ORR team members, approve the section of the final report for which the member is responsible.
- 4.15 ORR team leader, approve the final report AND forward a copy of the final ORR report to the WTS General Manager (or designee) for transmittal to the SAA.
- 4.16 Site Operations and Disposal Manager, ensure that any ORR findings include the following documentation;
- Corrective action plans to correct the findings, including an evaluation of any overall programmatic deficiencies and causes.
  - Closure package information for each prestart finding including a brief description of actual corrective actions taken, evidence of

completion, and reasons for concluding that closure has been achieved.

- 4.17 Following completion of the ORR, WTS General Manager (or designee), forward to the SAA a Readiness to Proceed Memorandum indicating that readiness to start up or restart nuclear operations has been achieved. A manageable list of open prestart issues may exist provided that the issues have a well-defined schedule for closure.
- 4.18 Site Operations and Disposal Manager, perform the following:
- 4.18.1 Ensure that all prestart findings from the ORR have been satisfactorily resolved prior to startup or restart of the facility, activity, or operation.
- 4.18.2 Startup or restart the facility, activity or operations upon receipt of approval from the SAA.
- 4.18.3 Forward ORR documentation to Operations Support for transmittal to Project Records.

## 5.0 READINESS ASSESSMENT REQUIREMENTS

---

### NOTE

Unless otherwise directed by CBFO, the SAA for RAs is the WTS General Manager or designee.

---

### NOTE

A graded approach applies to contractor RAs. An RA may be as short and simple as a check list, or may approach the breadth and depth of an ORR, depending on the causes and duration of the shutdown and the modifications accomplished during the shutdown. Line Management Assessments performed in accordance with WP 15-OR.01 cannot be substituted for an RA.

---

- 5.1 Site Operations and Disposal Manager, or designee, develop a POA using Attachment 7 of this document, which describes the scope of the RA, as follows:
- The POA shall provide a clear discussion of the physical or geographic scope of the RA and a clear description of the equipment, individual processes, and programs that are within the scope of the RA.
  - The POA shall designate the proposed RA team leader.

- The core requirements identified in Attachment 5 of this document shall be evaluated for applicability and inclusion in the scope of the RA.
  - If a particular core requirement will not be evaluated in the RA, justification shall be provided in the POA including referencing a timely, independent review that addressed the core requirement showing that it was successfully implemented. The level of detail provided in the justification shall be commensurate with the complexity of the review and of the operation, such that a knowledgeable reader would reasonably be expected to draw the same conclusions.
  - The POA should also discuss the depth or tailoring for each core requirement to more fully describe the total required scope of the RA.
  - The development of the scope of the RA shall be based, in part, on the status of and changes to the facility, operating procedures, safety basis documents, hazards, operational conditions, and personnel.
  - The POA for the RA shall include the prerequisites for starting the RA. Prerequisites define measurable actions or deliverables that, when completed, provide assurance that readiness has been achieved for each specific core requirement that is to be reviewed in the RA.
- 5.2 WTS shall forward the RA POA via a letter from the WTS General Manager to CBFO.
- 5.3 The POA shall be approved by the SAA prior to performance of a RA.
- 5.4 RA Team Leader, perform the following:
- 5.4.1 Select the RA team members, if members are needed, and ensure that team members meet the following qualification and training requirements:
- Technical knowledge of the area assigned for evaluation, including experience working in the technical area.
  - Knowledge of performance based assessment processes and methods.
  - Knowledge of facility, activity, or operation-specific information.

- An RA team member shall not review work for which she or he is directly responsible.
- The RA team leader shall determine and document the qualification of RA team members and their freedom from a conflict of interest in the areas they are assigned to review.

5.5 WTS management shall support the RA team leader in staffing the RA team.

---

**NOTE**

DOE-HDBK-3012 provides information useful to team leaders in preparing for and conducting Readiness Reviews. An RA IP may be as short and simple as a check list, or may approach the breadth and depth of an ORR IP.

---

5.6 RA Team, develop an RA IP that documents the evaluation criteria and the review approaches that covers the scope given in the RA POA. Attachment 7 of this procedure includes a sample format for a RA checklist.

5.7 RA Team Leader, approve the RA IP.

5.8 WTS shall forward the RA IP to CBFO for information.

5.9 Prior to starting the RA, Site Operations and Disposal Manager (or designee, perform the following:

5.9.1 Provide to the SAA a formal written Readiness to Proceed Memorandum certifying that the facility is ready for startup or restart.

5.9.2 Ensure that the preparations for startup or restart have been completed with the exception of a manageable list of open prestart issues.

5.9.3 Ensure that the prestart issues shall have a well-defined schedule for closure to allow the RA team to review the closure process.

5.9.4 Ensure that specific events, if any, significant to the startup and restart process that occur prior to the formal commencement of the RA; e.g., site emergency response drills, are reviewed by the RA team at the time they are conducted.

5.9.5 Ensure that the contractor RA POA prerequisites have been met.

- 5.9.6 Provide direction to the RA Team Leader that the RA may commence.
- 5.10 RA Team, conduct the RA in accordance with the RA IP upon direction from Line Management. Attachment 6 of this procedure includes example forms for documenting reviews, identifying findings, and associated corrective action plans for ORRs. The same forms can be used for documenting similar items in RAs.
- 5.11 Upon completion of the RA, RA Team Leader perform the following:
  - 5.11.1 Prepare a final report that document the results of the RA and make a conclusion whether startup or restart of the nuclear facility, activity, or operation can proceed safely.
  - 5.11.2 Ensure that the final RA report is adequately detailed to support its conclusion, such that a knowledgeable and independent reader would reasonably be expected to draw the same conclusions.
  - 5.11.3 Ensure that the final RA report identifies any pre start and post start findings and that corrective action plans have been developed by the functional area managers for identified deficiencies.
  - 5.11.4 Ensure that the final RA report includes a lessons learned section that may relate to design, construction, operation, and decommissioning of similar facilities, activities or operations and to help guide future Readiness Review efforts.
  - 5.11.5 Ensure that each team member approves the section of the final report for which he or she was responsible.
  - 5.11.6 Approve the final report.
  - 5.11.7 Submit the final RA report to the Site Operations and Disposal Manager for his concurrence including concurrence with the proposed corrective actions for any findings identified in the RA.
  - 5.11.8 Transmit the final RA report via a letter signed by the General Manager or designee to CBFO.
- 5.12 Site Operations and Disposal Manager, perform the following:
  - 5.12.1 Ensure that any prestart findings are resolved prior to generation of a Readiness to Proceed Memorandum. The Readiness to Proceed Memorandum is the formal

communication from WTS to CBFO stating that the facility has been brought to a state of readiness to start or restart nuclear operations. The Memorandum is a prerequisite to a DOE RA, if DOE is planning to conduct an RA.

- 5.12.2 Ensure that finding closure packages include a brief description of actual corrective actions taken, evidence of completion, and reasons for concluding that closure has been achieved. If a finding is a post-start, a schedule for completion of the item should be identified.
- 5.12.3 Generate the Readiness to Proceed Memorandum indicating that readiness to start nuclear operations has been achieved. It is preferable to delay submittal of the Readiness to Proceed Memorandum to the SAA until all prestart issues are closed.
- 5.12.4 Transmit the Readiness to Proceed Memorandum, the RA final report, and the status of resolution of prestart findings and a corrective action plan for post start findings, to the SAA.
- 5.12.5 Startup or restart the nuclear operation following approval by the SAA.
- 5.12.6 Forward RA documentation to Operations Support for transmittal to Project Records.

## Attachment 1 – Acronyms

**ACRONYMS**

CBFO	Carlsbad Field Office
DOE	U.S. Department of Energy
DSA	Documented Safety Analysis
IP	Implementation Plan
ISM	Integrated Safety Management
ORR	Operational Readiness Review
POA	Plan of Action
RA	Readiness Assessment
RR	Readiness Review
SAA	Startup Authorization Authority
SMP	Safety Management Programs
SNR	Startup Notification Report
TRU	transuranic
TSRs	Technical Safety Requirements
VSS	Vital Safety Systems
WIPP	Waste Isolation Pilot Plant
WTS	Washington TRU Solutions

**Attachment 2 – Items to Consider When Determining that a Readiness Review is Not Required**

- 1) Maintenance work completed during the shutdown is identified by package number with post maintenance testing specified. The post maintenance testing was thorough and completed with satisfactory results for those packages requiring retest.
- 2) Work packages completed during the shutdown have been verified to be complete and closed. Any work packages that are not closed have been evaluated and determined to not affect the ability to resume safe operations.
- 3) Operating staff turnover – there has been no turnover in the operating staff such that the operating staff is available and trained on modifications that affect the areas for which they are responsible.
- 4) Modifications that have been accomplished during the shutdown period have been reviewed such that any process procedure changes, any safety basis changes, and any procedures to implement the safety basis changes are complete, validated, and are in place and personnel are trained to operate the facility in accordance with the changed procedures. The modifications are not substantial as determined in Attachment 3 of this procedure.
- 5) The number and significance of updates to the safety basis are such that no special training is required for operating personnel or personnel who perform unreviewed safety question determinations to ensure that the facility will be operated within its safety basis.
- 6) Changes to operational procedures are minimal and have no effect on TSR controls or surveillances as determined through the USQ process.
- 7) Documentation records exist to identify those restarts or startups that do not require a readiness review.

### Attachment 3 – Determining if a Change is Substantial

The following should be considered when determining if a change is substantial:

- The number and significance of operational process changes necessary to accommodate the modification;
- The number of procedure changes and the difficulty or significance of the process changes to which the procedures apply;
- Changes to the process controls, limits, and instrumentation;
- The necessary level of training or retraining of operational and oversight staff to introduce the modification;
- The significance of the changes to the DSA and TSRs, with emphasis on the operational aspects of the changes; and,
- The level of operational process change and complexity of operational activities.

A change that meets one or more of the following criteria shall be considered a Substantial Process Change:

- Alters the footprint of an existing Hazard Category 1, 2, or 3 facility with the potential to adversely impact one or more credited safety functions of the existing facility;
- Introduces a new hazard not previously analyzed that requires a revision to the Hazards Analysis.
- Requires the expansion of work into an existing area of a facility that is not currently within the Safety Basis for that facility;
- Requires a structural addition to an existing building or structure that is designed to house hazardous activities or operations and that should require a new or revised Safety Basis;
- Involves environmental remediation activities in a new geographic area, structure, or building, provided that the work can reasonably be expected to encounter quantities of nuclear materials that would require designation as a Hazard Category 2 nuclear facility per DOE-STD-1027-92, Change Notice 1;
- Requires deactivation, decommissioning, or demolition of a facility or activity within a facility such that a new or revised Safety Basis is necessary.

#### Attachment 4 – Startup Notification Report Format and Content

Information to be included in the SNR for each startup or restart shall be accurate and adequate to support the recommended actions and permit an informed decision by CBFO. The SNR shall include, at a minimum:

- A brief description of the facility or program work, including Hazard Categorization, to be started or restarted.
- The reason for not operating (e.g., maintenance or modification outage, no program work, new facility, shutdown for safety concerns, etc).
- The approximate date that operations were last conducted (for restarts) and the projected date for the startup.
- The proposed type of readiness review, including whether a DOE RR is required.
- The basis or justification for the proposed type of RR.
- The proposed SAA.
- The projected date for the submittal of the associated POA.
- If more than one startup or restart is determined to require a RR, each one should be identified and included in the SNR.

## Attachment 5 – Core Requirements to Address in a Readiness Review Plan of Action

Core requirements verify the readiness of personnel, procedures, programs, and equipment within the scope of the Readiness Review to safely start nuclear operations. These core requirements are directly related to the seven guiding principles of ISM:

1. Line management has established Safety Management Programs (SMPs) to ensure safe accomplishment of work:
  - a. Contract requirements for the SMPs have been flowed down into facility specific procedures.
  - b. SMP implementing procedures have been effectively implemented in support of the facility.
  - c. A sufficient number of qualified personnel are available to effectively implement the SMPs in support of the facility.
  - d. Adequate facilities and equipment are available to ensure that SMP support and services ensure safe facility operations. The following SMPs are identified in WTS' DSA:
    - Hazardous Material Protection
    - Radioactive and hazardous Waste Management
    - Operational Safety – Conduct of Operations and Fire Protection
    - Initial Testing, In-Service Surveillance and Maintenance
    - Quality Assurance
    - Emergency Preparedness
    - Provisions for Decontamination and Decommissioning
    - Management, Organization, and Institutional Safety Provisions
    - Procedures and Training
    - Human Factors
    - Criticality Safety Program

The POA, which must be approved by the SAA, must specify those SMPs to be included in the readiness review and shall specify the scope of the desired review of each designated SMP. Additional support programs may be specified in the POA if required to ensure safety of nuclear operations.

## Attachment 5 – Core Requirements to Address in a Readiness Review Plan of Action

2. Functions, assignments, responsibilities, and reporting relationships, including those between operating organizations and environment, safety and health support organizations, are clearly defined, understood, and effectively implemented, with WTS line management responsibility for control of safety.
3. The selection, training, and qualification programs for operations and operations support personnel have been established, documented, and effectively implemented. Training and qualification requirements for each position encompass the range of assigned duties and activities. The selection process and applicable position specific training for managers ensures competence commensurate with their responsibilities. Modifications to the facility have been reviewed for potential impacts on training and qualification. Training has been performed to incorporate all aspects of these changes.
4. Level of knowledge of managers, operations, and operations support personnel is adequate based on reviews of examinations and examination results, selected interviews of managers, operating, and operations support personnel, and observations of operational demonstrations.
5. Personnel exhibit an awareness of public and worker safety and health and environmental protection requirements and, through their actions, demonstrate a high priority of commitment to comply with these requirements. Worker safety and health requirements of 10 CFR Part 851, "Worker Safety and Health Program", have been implemented.
6. Facility safety documentation (normally DSA and TSRs) is in place that describes the safety envelope of the facility.
  - a. The safety documentation characterizes the hazards/risks associated with the facility and identifies preventive and mitigating measures (systems, procedures, administrative controls, etc.) that protect workers and the public from those hazards/risks.
  - b. Facility safety documentation is approved and has been implemented.
  - c. Implementation of facility safety documentation has been verified and is current.
  - d. WIPP systems, structures and components are defined.
  - e. A system to maintain control over facility design with emphasis on Vital Safety Systems (VSS) is established.
  - f. Procedures for maintaining the safety documentation have been adequately defined and implemented and provide for required updates.

## Attachment 5 – Core Requirements to Address in a Readiness Review Plan of Action

- g. A DOE approved Unreviewed Safety Question procedure has been effectively implemented.
7. A program is in place to confirm and periodically reconfirm the condition and operability of VSS. This includes examinations of records of tests and calibration of these systems. The material condition of safety, process, and utility systems is adequate to support the safe conduct of work.
8. The facility systems and procedures, as affected by facility modifications, are consistent with the description of the facility, accident analyses, and assumptions included in the safety documentation. A formal program is defined and implemented to control facility modifications. Authorized modifications within the scope of the Readiness Review have been completed and fully closed, or evaluated, and determined not to affect the ability to safely start nuclear operations.
9. Adequate and accurate procedures and safety limits are approved and in place for operating the process systems and utility systems. The procedures include necessary revisions for all modifications that have been made to the facility. Facility processes ensure that only the most current revision to each procedure is in use.
10. A routine operations drill program and an emergency management drill and exercise program have been established and implemented. Records for each program are adequate to demonstrate the effectiveness of completed drills and exercises as well as planning for future drills and exercises.
11. An adequate startup or restart program has been developed that includes plans for graded operations and testing after startup or resumption to simultaneously confirm operability of equipment, the viability of procedures, and the performance and knowledge of the operators. The plans should indicate validation processes for equipment, procedures, and operators after startup or resumption of operations, including any required restrictions and additional oversight. Any compensatory measures required during the approach to full operations are described.
12. The formality and discipline of operations are adequate to conduct work safely, and programs are in place to maintain this formality and discipline. Sufficient numbers of qualified personnel are available to conduct operations.
13. Formal agreements between the operating contractor and DOE have been established via the contract or other enforceable mechanism to govern facility operations. A systematic review of the WTS's conformance to these requirements has been performed. These requirements have been implemented in the facility, or compensatory measures are in place during the period of implementation. The compensatory measures and the implementation period are approved by CBFO.

Attachment 5 – Core Requirements to Address in a Readiness Review Plan of Action

14. An effective feedback and improvement process has been established to identify, evaluate, and resolve deficiencies and recommendations made by WTS line management and audit and assessment groups. The process also provides for resolution of issues and recommendations by external official review teams and audit organizations.

## Attachment 6 – Guidance for the Format and Content of an ORR Implementation Plan

The IP is the plan for conducting the ORR. It includes the checklists, evaluation criteria, review methodology, qualification requirements for team members, and reporting expectations, as necessary, to efficiently execute and report the results of the ORR. The IP is intended to document not only the process the team uses to conduct the review, but also is intended to define the rationale for that process. In documenting the process, the team may evaluate the selection of criteria and review approaches, the procedures that it uses to develop findings and conclusions, and the criteria to be applied to categorize findings as prestart and post-start. The following format is recommended.

1. **Introduction and Background:** The introduction should describe the activity that is intended to be reviewed and the reason for shutdown (if a restart). The background section describes the basic process, hazards, and issues associated with the activity to be reviewed.
2. **Purpose:** This section should describe the reasons why the review is being conducted and provides the basic insights for the defined scope of the review.
3. **Scope:** The scope section should describe the scope from the approved POA. Each breadth element (core requirement) required by the POA must be incorporated into the IP. The depth to which each scope element is evaluated is specified and quantified by the IP criteria and review approaches (CRADs) to be consistent with the discussion in POA.
4. **Prerequisites:** The IP should summarize the prerequisites for starting the ORR, including those specified in the POA.
5. **Review Approach:** This section defines the approach by which the RR is conducted and includes the RR CRADs as an appendix/attachment to the IP. The quality of CRADs significantly impacts the overall quality of the RR. CRADs are the bases used to evaluate the CRs (from Attachment 5 of this document).

The CRADs provide the means by which the graded approach is applied to the scope of the ORR. The areas that are significant to the startup or restart should be assessed in greater depth than other areas. For example, if, during a maintenance shutdown, a system was modified or a new system was added, the training, procedures, documentation, and safety basis for the new system should be reviewed exhaustively. Another system that did not undergo modification would receive a less comprehensive review.

Since the IP must include all CRs as specified in the POA, the Objective in each CRAD should include all, or selected portions, of one or more CRs. This ensures that all CRs are addressed regardless of the approach used in developing the criteria. Each criterion, should be a statement of the specific actions or attributes the RR team member(s) use to make a judgment as to the readiness of the site, facility, or process to operate in this specific area.

## Attachment 6 – Guidance for the Format and Content of an ORR Implementation Plan

The Review Approach section of the CRAD should describe the documents to be reviewed, the personnel to be interviewed, and the shift evolutions, including tours and walkdowns, to be observed that enable the team to reach a conclusion as to whether the criteria have been met. The final portion of the CRAD should include any references DOE Orders, Standards, or site-specific requirements against which the preceding criteria are to be assessed.

6. ORR Preparations: This section describes any preparations, including pre-visits and document reviews, for example, that may be undertaken prior to the onsite review. A discussion of qualifications and training considerations for ORR team members may appear here.
7. ORR Preparations: This section describes any preparations, including pre-visits and document reviews, for example, that may be undertaken prior to the onsite review. A discussion of qualifications and training considerations for ORR team members may appear here.
8. ORR Process: This section describes how the ORR is intended to be conducted. Subjects include the sequence of activities from the initial in-briefing through the final out-briefing, including record reviews, interviews, and operational demonstrations. The section should discuss the conduct of team meetings, the overall decision process, and developing the final report. Some discussion may be appropriate as to how evolutions and upsets should be conducted and observed.
9. Administration: This section should describe the mechanism for ORR-related meetings, correspondence, communications, and team structure. The ORR team composition, organization, interface requirements, and any oversight groups and DOE organizations to be involved in the review should be discussed in this section.
10. Reporting and Resolutions: This section should detail the methods that the ORR team should use to report review results.
11. Schedule: This section should include a discussion of the proposed schedule for any preparation, pre-visits, the onsite review, report preparation, and closeout.
12. Appendices/Attachments: This section includes the CRADs that the team members will use. This section includes reporting forms, team resumes, and other information that is appropriate to append.

The following three forms provide a recommended format for reporting Assessments by RR team members, for documenting deficiencies noted during the assessments, and for documenting the plan for resolving deficiencies or findings identified during the assessments performed by team members.

## Attachment 6 – Guidance for the Format and Content of an ORR Implementation Plan

**Assessment Form (FORM 1)**

This form documents the methods and actions taken by an ORR team member in the criteria evaluation process. Each Form 1 covers a specific objective and lists the means the team member used to measure the site's performance relative to the objective provided in the CRAD. The Form should be complete enough to allow the reader to follow the inspection logic and means utilized to verify the facility's performance with respect to the criteria and to thereby validate the completeness and adequacy of the RR. The approach used should be what the CRAD called for.

**Functional Area:** The functional area to which the CRAD is assigned.

**CRAD Identifier/Title:** Identifies the CRAD or portion of the CRAD that the Form supports.

**Personnel Contacted/Positions:** The individuals who are interviewed should be listed by title.

**Records and Other Documents Reviewed:** The documents should be listed in bullet format.

**Observations/Evolutions:** List evolutions/observations with location (e.g., building) and specific facilities visited in bullet form.

**Discussion of results:** Provide a discussion of the performance against the criteria. Each criterion should be discussed separately so that it is clear why the criterion was or was not met.

**Conclusion:** Provide a conclusion as to whether the objective has been met, and if not met, reference applicable Form 2s. It is possible for individual criteria to be not met and findings developed while still considering the overall objective met. Similarly, it is appropriate to conclude that a criterion was met even if findings are identified that relate to the criterion. The professional judgment of the team member, Team Leader, and Senior Advisor will come into play to determine whether criteria and objectives are met. This section of the Form 1 provides the basis for the RR final report and conclusions as to whether the facility has achieved readiness to start nuclear operations. This section should be a standalone statement that describes in detail whether or not the objective was met and why. (It is anticipated that the wording in this section can be transcribed directly into the RR report within the functional area summary.)

**Reviewed by/Inspected by/Date:** The team member who conducted the evaluation signs where indicated.

**Approved by/Date:** The Team Leader signs the form after all changes have been incorporated. His or her signature indicates that the Form is final.

## Attachment 6 – Guidance for the Format and Content of an ORR Implementation Plan

**Deficiency Form (FORM 2)**

This form is used to document the findings identified during the evaluation process. A separate Form 2 should be generated for each finding related to a particular CR. If, for example, three findings are discovered, the reviewer would then generate three Form 2s to detail each deficiency. A single Form 2 may be used to identify a generic problem for which a number of individual examples are listed. Clear communication is the objective and the specific number of Form 2s necessary to detail findings is at the discretion of the team member and Team Leader. Team members should complete draft Form 2 write-ups as soon as there is reasonable evidence to substantiate a finding. This allows the Team Leader to provide site management a daily briefing of emerging issues. Draft Form 2s should be provided to manager who will be responsible for the corrective action plan to ensure that the finding is accurate. The following is an example format for documenting findings.

**Functional Area:** The functional area to which the CRAD has been assigned.

**CRAD Identifier/Title:** Identifies the CRAD or portion of the CRAD that the Assessment Form supports.

**Finding ID #:** Use a unique identifying number to correlate the finding (Form 2) and disposition document (Form 3). Once assigned, this number should appear on all revisions and updates.

**Requirement:** The applicable portion of the CRAD should be quoted to clearly state the standard of performance that was judged to be deficient. The requirement may also include specific quotes from a contract requirement or an implementing mechanism to which the facility shall comply.

**References:** List applicable references such as DOE Orders, CFRs, and site implementing documents. The reference should be specific down to the section to allow for easy referral.

**Issue:** A title for the finding that can be used to identify the finding verbally, much as the ID # is used to identify the finding numerically. The issue should be identified to indicate whether the issue is a finding (deficiency) or an observation.

**Discussion:** The section is specific with respect to the requirements and avoids speculation or sweeping generalities based on a small sample. Conclusions that assert programmatic deficiencies based upon multiple observed inadequacies or weaknesses are acceptable. Use of superlatives of the type: "...is the worst," or ... is the best" should be avoided. Discussion should focus on whether the CR is being met as measured by the criteria.

**Finding Designation:** This section defines whether the finding is a prestart or post-start finding. The RR Team Leader, in consultation with the team member responsible for the finding and Senior Advisor, if applicable, will make this determination using the criteria specified in the POA.

**Signature and Date:** To be signed by the RR team member who identified the issue

## Attachment 6 – Guidance for the Format and Content of an ORR Implementation Plan

**Finding Resolution Form (FORM 3)**

The Finding Resolution Form is to document the plans and actions taken to correct findings identified during the RR. A separate Form 3 should be generated for each finding related to a particular objective.

**Functional Area:** The functional area to which the CRAD has been assigned.

**CRAD Identifier/Title:** Identifies the CRAD or portion of the CRAD that the Appraisal Form supports.

**Finding ID #:** This number should be the same as the number identified on the Form 2

**Issue:** The finding issue statement from the corresponding Form 2 is placed here.

**Finding Designation:** This section indicates whether the finding is a prestart or post-start finding.

**Responsible Individual:** The individual who is assigned responsibility for correcting the finding is identified in this block.

**Corrective Action Plan:** A description of the plan to resolve the finding, along with proposed dates of completion, is presented in this section. A compilation of these plans taken from all the Form 3s generated during the RR are included in the Action Plan that is submitted to the SAA for approval.

**Resolution:** A description of the actual actions taken, the dates of completion, and the reasons for concluding that closure has been achieved. The resolution can be tracked through the site issues management process WP04-IM1000, Issues Management Processing of WIPP Forms and the associated Commitment Tracking numbers.

**Signature/Date:** This block is signed by the manager responsible for resolution of the issue. The signature indicates that the actions specified in the Corrective Action Plan and detailed in the Resolution block have been satisfactorily completed.

**Verified:** This signature block is used by the official designated by Site Operations and Disposal Manager or the General Manager as to verify management's successful fulfillment of the corrective actions. This signature may not be required if the Issues Management process is used.

## Attachment 7 – Readiness Assessment Plan of Action Sample Format

**Section I. ACTIVITY DESCRIPTION (Example – RA for Contact Waste Handling of TRUPACT III and the Standard Large Box #2 at the Waste Isolation Pilot Plant)**

**Activity:** A description of Activity.

**Facility Location:** Facility Description and Categorization and location within the facility where the new activity will be conducted..

**Scope:** This information should be drawn from the following:

- Repairs accomplished during the shutdown (if applicable)
- Modifications accomplished during the shutdown period
- Major equipment, instrumentation, electrical supplies, within the scope of the new activity, repairs or modifications should be identified. A simple drawing showing the major components and boundaries should be included. This may be a one-line drawing or a process flow diagram, as appropriate, to describe the equipment to be evaluated in the RA.
- Affect on the Authorization Basis including the Documented Safety Analysis and Technical Safety Requirements, any regulatory permits, etc.
- Any process changes (if applicable)
- Any program changes as a result of the activity, repairs, or modifications
- Complexity of the activity, repairs, or modifications
- Any procedure changes resulting from the new activity, repairs, or modifications
- Any new hazards resulting from the new activity, repairs, or modifications
- Any training requirements affected by the new activity, repairs, or modifications
- The operating and support personnel affected by the new activity, repairs or modifications

**Documents to be Included in the RA**

- Procedures
- Programs

## Attachment 7 – Readiness Assessment Plan of Action Sample Format

- Design documentation including drawings (plant layout, piping and instrumentation, instrument location drawings, and loop diagrams, logic diagrams, electrical distribution drawings, wiring diagrams, cable listings, electrical block diagrams, open Engineering Change Orders, System Design Description Changes, Spare Parts Identification, Operating and Maintenance Manuals for new or modified equipment within the scope of the RA, etc.
- Equipment startup information including RPM, inrush current, running amps, calibration data, megger results, etc., as applicable
- Round sheets, surveillance data sheets associated with new activity, repairs, or modifications.
- Authorization Bases/Safety documents (e.g., DSA, TSRs, USQs, permit changes, etc.).

**Proposed Readiness Assessment Team Leader**

The name of the proposed RA team leader and a discussion of the individuals qualifications such that it is clear that the RA team leader meets the requirements of DOE STD-3006-2000 5.1.5.1.

**Startup/Restart Authorization Authority**

The name of the Startup/Restart Authorization Authority.

**Section II. READINESS ASSESSMENT CHECKLIST**

A checklist similar to the one below can be used to identify the core requirements to be evaluated during the RA. If a particular core requirement will not be evaluated, a justification is provided. It is also acceptable to generate CRADs similar to that used in an ORR instead of a check list.

<b>READINESS CHECKLIST (Example)</b>		
<b>Activity/Task ID:</b>		
<b>Activity/Task Title:</b>		
<b>Check "Yes" or "No". Provide a basis for all items checked "N/A."</b>		<b>Core Requirement(s)</b>
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1. Authorization Basis documents requiring change as a result of the new activity, repairs, or modifications have been updated, reviewed, and approved by the appropriate authority, and are ready to implement.  Basis:	7, 9, 10
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2. Change Evaluations/USQD process/USQD support facility operation.  Basis:	7, 9, 10
<input type="checkbox"/> Yes <input type="checkbox"/> No	3. Personnel are aware of Authorization Basis conditions of operations.	1, 2, 3, 4, 5

## Attachment 7 – Readiness Assessment Plan of Action Sample Format

[ ] N/A	Basis:	
[ ] Yes [ ] No [ ] N/A	4. Procedures and work instructions are current, approved, and properly controlled.  Basis:	7, 9, 10, 13
[ ] Yes [ ] No [ ] N/A	5. Personnel required for activity performance have completed training and qualification requirements, including familiarization with the latest revision of procedures required for activity/task performance.  Basis:	1, 2, 3, 4, 5, 6
[ ] Yes [ ] No [ ] N/A	6. Personnel have established proficiency in the activity/task to be conducted.  Basis:	1, 2, 3, 4, 5, 6
[ ] Yes [ ] No [ ] N/A	7. A Job Hazard Analysis is completed for the new activity or operation following repairs or modification in accordance with WP 12-IS3002, Job Hazard Analysis Performance and Development, and necessary controls are identified and implemented through procedures associated with operating and maintaining the new or modified equipment.  Basis:	7, 13, 14
[ ] Yes [ ] No [ ] N/A	8. Any lifts associated with the new activity or modified equipment have been reviewed and approved by the appropriate safety, engineering, and operating personnel, such that those lifts are performed in accordance with approved procedures.  Basis:	7,13
[ ] Yes [ ] No [ ] N/A	9. Required radiation work permits, discharge permits, disposal permits, etc. associated with the new activity or modified equipment have been approved and implemented.  Basis:	7, 13
[ ] Yes [ ] No [ ] N/A	10. Equipment and tools required for the new activity or operating the modified equipment have been identified, verified operational, , are calibrated, and the use procedurally controlled.  Basis:	1, 7, 8, 13
[ ] Yes [ ] No [ ] N/A	11. All Work Order post-installation testing for the activity/task is complete and the work orders are complete through Operations Acceptance.  Basis:	7, 9, 10, 12, 13
[ ] Yes [ ] No [ ] N/A	12. Maintenance records have been reviewed and a pre-start or post-start applicability determined. All pre-start maintenance work is complete through Operations Acceptance.	8, 13, 14

## Attachment 7 – Readiness Assessment Plan of Action Sample Format

	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13. Affected Technical Basis Documents have been developed or revised, and the packages closed.	7, 9, 10
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	14. Equipment pre-operational testing is complete and the test results are approved.	10, 12, 13
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	15. All Personal Protective Equipment (PPE) required for this activity/task is available in acceptable condition and sufficient quantity to support operations.	7, 13, 14
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	16. All necessary supporting utilities and support services have reported readiness to support startup or restart of the activity by their responsible managers.	1, 2, 8, 11
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	17. System limits, process limits, or hazardous material limits have been identified and implemented in appropriate procedures, work instructions, etc., for conduct of the activity/task.	8, 12
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	18. Safeguards and security issues have been identified and addressed.	7, 8, 9, 10
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	19. Environmental permit requirements and exemptions have been reviewed and implemented to ensure compliance.	7, 9, 10
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	20. Applicable Lessons Learned have been reviewed and identified issues resolved.	15
	Basis:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	21. Sufficient personnel have been assigned responsibilities to support the safe startup and operations of this facility.	2, 11
	Basis:	

## Attachment 7 – Readiness Assessment Plan of Action Sample Format

***Notification, Concurrence and Approvals***

The Readiness Assessment scope and criteria to be evaluated as identified in this Plan of Action have been developed and approved by the Readiness Assessment Review Team.

Review Team Leader: \_\_\_\_\_ Date: \_\_\_\_\_

I concur with the scope and evaluation criteria to perform the Readiness Assessment for  
(Description of Activity)

Site Operations & Disposal Manager: \_\_\_\_\_ Date: \_\_\_\_\_  
(Note- More concurrence signatures can be added if desired)

**Section III. PREREQUISITES**

The prerequisites for performing the RA are listed in this section. The following are examples of items to be considered when developing the list of prerequisites for the RA. The specific RA may require more prerequisites than those listed below:

- a. The Readiness Assessment Checklist has been completed and approved by the Site Operations and Disposal Manager.
- b. A USQD has been performed on the new activity, repair, or modification. The USQD for the new activity, repair, or modification has been found to not represent an unreviewed safety question. If the new activity, repair, or modification results in a change to the safety basis and TSRs, the changes have been identified and approved by the DOE safety basis approval authority.
- c. The procedure(s) affected by the new activity, repair, or modification have been updated, reviewed, approved, and are in effect.
- d. Operators are trained and have demonstrated proficiency in performing the procedures affected by the new activity, repair, or modification.
- e. Required testing and calibrations are complete and test exceptions have been dispositioned.
- f. Open items against the facility have been dispositioned, including closure of all pre-start items.
- g. All pre-start work packages are completed through Operations Acceptance.
- h. All specified training and qualification activities are complete and documented.